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SEP 23 2004

PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: ADRIANO ROSA
For: CORRECTING FOOT ALIGNMENT
Serial No.: 10/604,418 Examiner: Yaritza Guadalupe
Filed: July 18, 2003 Group Art Unit: 2859
Atty. Docket: 71480-0003 Confirmation Number: 1417

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

☐ deposited with the United States Postal Service
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703-872-8306.

Rebecca L. Shilt
Signature

Date: Sept. 23, 2004

Rebecca L. Shilt
(type or print name of person certifying)

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

RESPONSE TO OFFICE ACTION

09/27/2004 AJOHNS01.00000019 502003 10604418
In response to the Office action mailed June 28, 2004, kindly amend the above-identified application as follows:

01 FC:2201 43.00 DA
02 FC:2202 18.00 DA
A complete listing of amendments to the specification begins on page 2.

A complete listing of the claims begins on page 4 of this paper.

Remarks/Arguments begin on page 15 of this paper.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10604418

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	68 minus 20 =	* 48
INDEPENDENT CLAIMS	6 minus 3 =	* 3
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 70	Minus ** 68	= 2
Independent	* 7	Minus *** 6	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate fee in column 1.

SMALL ENTITY TYPE ☐

RATE	FEE
BASIC FEE	\$375
X\$ 9=	432
X42=	126
+140=	—
TOTAL	933

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	\$750
X\$18=	
X84=	
+280=	
TOTAL	

SMALL ENTITY TYPE ☐

RATE	ADDITIONAL FEE
X\$ 9=	18
X42=	43
+140=	
TOTAL	61

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	